See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Foxic Substances Control Division Sacramento, California

Please p	e print or type. (Form designed for use on elite (12-pitch typewriter). UNIFORM HAZARDOUS 1. Generator's US EPA ID No. Manifest 2. Page 1								
	WASTE MANIFEST CAD 008 252 983	Documer	nt No.		of is not	required	he shaded areas by Federal law.		
200	3. Generator's Name and Mailing Address PARA PLATE				A. State Manifest Document Number 88346491				
N N	15910 SHOEMAKER AVE, CERRITOS, CA 90703 4. Generator's Phone (21)3 404-3434				B. State Generator's ID				
9 _				C. State Transporter's ID 2084/55					
B					D. Transporter's Phone 213 698-0				
	7. Transporter 2 Company Name 8. US EPA ID Number E. State Transporter's I)			
Table 1	9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 10. US EPA ID Number 12504 E. WHITTIER BLVD			F. Transporter's Phone G. State Facility's ID					
				CIAIRO141212141510101/1					
	WHITTIER, CA 90602 CAD 042 245 001 H. Facility's Phone 213 698-0991						-		
The second	1. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID N	lumber)	2. Conta	iners Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No		
G E	WASTE ORM-A N.O.S NA 1693 (FLEXOSOLVENT)						S短归1,21		
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0				_	111		EPA/Other		
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d							State		
		١.	.				EPA/Other		
J	Additional Descriptions for Materials Listed Above			K. Hand	dling Codes for W	astes Li	sted Above		
	A) FOR RECYCLE			a.	01.	b.			
Section 1				C.	***************************************	d.	-		
1	15. Special Handling Instructions and Additional Information								
No.	PROFILE NUMBER B 10016								
NO.	emergency contact 213 404-3434								
1	16.								
	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.								
	If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste								
0	generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Signature Month Day								
4	Enough E 110 Mars 10 107 7	zanti E.	E	200	- A	_	1/18701 (F		
T 17		econo c.					CARCIT		
A Pr	inted/Typed Name Signatu	17.11	- 11		7		Month Day		
p	Transporter 2 Acknowledgement of Receipt of Materials	Jean	1	<u> </u>			108011		
0	inted/Typed Name Signatu	re . P	2				Month Day		
E R									
F A C	19. Discrepancy Indication Space								
I 20	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Y Pr	N. JAY SOLOMON. Signatu	no M	A.	1-1	domon		Month Day		
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(Rev. 9-88) Previous editions are obsolete.

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To P.O. Box 3000, Sacramento, CA 95812